AMENDMENTS TO THE SPECIFICATION

Please delete the "References Cited [Reference By]" and "Reference List" sections beginning on the first paragraph of page 2 and continuing through the middle of page 6. These references will be submitted with a separate and properly filed information disclosure statement.

Please replace the first paragraph on page 19 with the following paragraph:

The QT and QTc intervals may be individually placed in the bins according to their measurement as described in Shell and Callahan. In a preferred embodiment the composite curves are constructed by software programs that generate a time series of approximately 100,000 data points long of RR/QT/ QTc triplets for each patient. Then the QTc data for each patient is binned in a histogram for that patient, finally, software is used to merge many patients' data into a composite data set (a "population") and to take means and standard deviations of this population (assuming normalcy of the data). Finally, ~~more~~ the data thus aggregated into two or more populations can then be compared, again using a combination of software and procedures as described in Press et al([71]), against each other to check for statistical difference between these two or more populations.

Please delete the last paragraph on page 9 titled, "Description of the Illustrations" and add the following paragraph before the paragraph titled, "DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENT" on page 12 of the specification:

BRIEF DESCRIPTION OF THE DRAWINGS

Figure 1. Frequency of QT and QTc intervals in a Normal Subject

Figure 2. Frequency of QT and QTc intervals in a Patient with ILQT

Figure 3. QTc Interval Histogram of a Subject taking Cisapride

Figure 4. Holter Data Comparisons of composite curves from normal subjects, subjects on cisapride and subjects with Inherited Long QT Syndrome (ILQT)

Figure 5. Comparisons Pre/Post Dose of Drug using composite curves (N=19).

Figure 6. Individual Patient with ILQT Compared to a Composite Histogram of Normal Subjects